

NEIGHBORHOODS FIRSTNeighborhood Outreach Program

Neighborhood Association Registration Form

- 1. Name of the Neighborhood Association:
- 2. General location of Neighborhood Association:

Indicate boundaries of the neighborhood (street names or other such landmarks are OK)

- 3. In what city representative district is your organization located?
- 4. Purpose for organizing/community issues of importance:

5. Does your Neighborhood Association have elected officers?		
6. Primary Neighborhood Association Contact(s):		
Name		Phone Number(s)
Mailing Address	Zip Code:	Fax
Position (Officer or General Me	mber)	E-Mail Address
Name		Phone Number(s)
Mailing Address	Zip Code:	Fax
Position (Officer or General Me	mber)	E-Mail Address
7. If your Association has a web site, please list it below:8. How long has your Neighborhood Association been in existence?		
9. Where and when does your organization usually meet?		
10. Are you interested in information about a neighborhood plan?		

11. Do you anticipate the need for city staff representation at your neighborhood association meetings?

Indicate "Yes," "No," or "Undecided"

If "yes," please register your requests for a City staff representative in written form no less than 72 hours prior to the neighborhood meeting in question.

12. If your Association has compiled a list of priorities on which to concentrate or has developed a neighborhood plan, please describe these objectives in the space below:

Include the following materials with your Registration Form:

- Copy of by-laws
- Copy of map of geographic boundaries (optional)
- Membership list (optional)

PLEASE RETURN THE MATERIALS TO:

George G. Sarmiento, Director of Planning, 2 Civic Center Plaza, 2nd Floor, El Paso, Texas 79901, 915-541-4024

